

# POSITION DESCRIPTION (Please Read Instructions on the Back)

1. Agency Position No.										
2. Reason for Submission <input type="checkbox"/> Redescription <input checked="" type="checkbox"/> New <input type="checkbox"/> Hdqtrs <input checked="" type="checkbox"/> Field <input type="checkbox"/> Reestablishment <input type="checkbox"/> Other Explanation (Show any positions replaced) Standard MWR NAF PD					3. Service					
4. Employing Office Location					5. Duty Station					
6. OPM Certification No.					7. Fair Labor Standards Act <input type="checkbox"/> Exempt <input checked="" type="checkbox"/> Nonexempt					
8. Financial Statements Required <input type="checkbox"/> Executive Personnel Financial Disclosure <input type="checkbox"/> Employment and Financial Interest					9. Subject to IA Action <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
10. Position Status <input type="checkbox"/> Competitive <input type="checkbox"/> Excepted (Specify in Remarks) <input type="checkbox"/> SES (Gen.) <input type="checkbox"/> SES (CR)					11. Position Is <input type="checkbox"/> Supervisory <input checked="" type="checkbox"/> Managerial <input checked="" type="checkbox"/> Neither					
12. Sensitivity <input checked="" type="checkbox"/> 1-Non-Sensitive <input type="checkbox"/> 3-Critical <input type="checkbox"/> 2-Noncritical Sensitive <input type="checkbox"/> 4-Special Sensitive					13. Competitive Level Code					
14. Agency Use NAF										
15. Classified/Graded by		Official Title of Position			Pay Plan		Occupational Code		Grade	
a. Office of Personnel Management										
b. Department, Agency or Establishment										
c. Second Level Review		Secretary			NF		0318		02	
d. First Level Review										
e. Recommended by Supervisor or Initiating Office										
16. Organizational Title of Position (if different from official title)					17. Name of Employee (if vacant, specify)					
18. Department, Agency, or Establishment					c. Third Subdivision					
a. First Subdivision					d. Fourth Subdivision					
b. Second Subdivision					e. Fifth Subdivision					
19. Employee Review-This is an accurate description of the major duties and responsibilities of my position.					Signature of Employee (optional)					
20. Supervisory Certification. I certify that this is an accurate statement of the major duties and responsibilities of this position and its organizational relationships, and that the position is necessary to carry out Government functions for which I am responsible. This certification is made with the knowledge that					this information is to be used for statutory purposes relating to appointment and payment of public funds, and that false or misleading statements may constitute violations of such statutes or their implementing regulations.					
a. Typed Name and Title of Immediate Supervisor					b. Typed Name and Title of Higher-Level Supervisor or Manager (optional)					
Signature					Signature					
Date					Date					
21. Classification/Job Grading Certification. I certify that this position has been classified/graded as required by Title 5, U.S. Code, in conformance with standards published by the U.S. Office of Personnel Management or, if no published standards apply directly, consistently with the most applicable published standards.					22. Position Classification Standards Used in Classifying/Grading Position					
Typed Name and Title of Official Taking Action S. J. NEW Principal Classifier					OPM PCS Secretary Series, GS-0318, TS-64 Jun 82, TS-34 Jan 79					
Signature					Information for Employees. The standards, and information on their application, are available in the personnel office. The classification of the position may be reviewed and corrected by the agency or the U.S. Office of Personnel Management. Information on classification/job grading appeals, and complaints on exemption from FLSA, is available from the personnel office or the U.S. Office of Personnel Management.					
Date					Date					
23. Position Review					24. Remarks					
a. Employee (optional)										
b. Supervisor										
c. Classifier										

## 25. Description of Major Duties and Responsibilities (See Attached)

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U.S. Office of Personnel Management  
FPM Chapter 295

**NONAPPROPRIATED FUND POSITION DESCRIPTION JOB TITLE:** Secretary **POSITION NUMBER** 01-0124 **JOB SERIES:** 0318 **PAY LEVEL:** NF-2 **Summary of Duties:**

The incumbent provides assistance to Division Head who directs one or more Branch Sections within MWR. Performs a variety of responsible secretarial, and administrative duties requiring a substantial level of judgment, experience and discretion. Screens calls and visitors, personally handles many requests for information and refers others as appropriate.

Types correspondence, reports and other materials. Maintains various files, regulations, manuals and directives. May take and transcribe dictation. Reads all incoming correspondence, determining proper action. Reviews outgoing correspondences and reports ensuring proper format. Keeps the Division Head's calendar and schedules appointments and meetings according to his/her workload and current issues of importance.

Handles matters and situation of a confidential and sensitive nature. Performs independently with daily responsibilities. May direct the activities of other employees engaged in a variety of clerical and typing duties, assign and review their work.

Perform other related duties as assigned.

**Minimum Qualifications:**

A minimum of one year of experience in responsible clerical support work which demonstrates ability to perform the work of the position under general supervision. Work involved requires a high level of commitment to the policies and program goals of the division. Must possess demonstrated office work knowledges and experience in order to accomplish responsible clerical duties. Must have knowledge of grammar, spelling, punctuation, and ability to type, operate a CRT (computer terminal) or Personal Computer to adapt to various software applications. Must demonstrate effective oral and written communication.